|                    | PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004 |  |           |                    |   |                                      |            |                   |  |                      |                   | Application or Docket Number 10/541787 |  |                        |                             |   |  |
|--------------------|---|--|-----------|--------------------|---|--------------------------------------|------------|-------------------|--|----------------------|-------------------|--|--|------------------------|-----------------------------|---|--|
|                    |   | SMALL ENTITY OTHER THAI  |           |                    |   |                                      |            |                   |  | —<br>N               |                   |  |  |                        |                             |   |  |
|                    | ILS MATIC   | WAL CYACE 6  |           | (Column 1)         |   | (Column 2)                           |            | 7                 | 1165   |                      |                   | <del></del>                            | OR SM  | ALL                    | ENTIT                       | ~ |  |
|                    | U.S. NATIONAL STAGE FEES  BASIC FEE  EXAMINATION FEE                    |  |           |                    |   |                                      | BASIC F    |                   | TE   | FEE                  |                   | RA                                     | TE   | FE                     | EE                          |   |  |
|                    |   |  |           |                    | L ENT. = \$ 150   | LARGE ENT = \$                       |            |                   | EE   |                      |                   | OR BASIC FI                            | ΕE   | 300                    |                             |   |  |
|                    |   |  |           |                    | PCT Article 33(1)-<br>\$ 50 / \$ 100                    | All other situation \$ 100 / \$ 200  |            |                   | EE   |                      |                   | EXAM. FE                               |  |                        |                             |   |  |
|                    | SEARCH FEE  |  |           |                    | A = \$50/\$100<br>er countries =<br>00/\$400            | All other situations \$ 250 / \$ 500 |            |                   |  | SEARCH FEE           |                   |  | SEARCH   | FEE                    | 40                          |   |  |
|                    | FEE FOR EXTRA SPEC. PGS.  |  |           |                    | minus 100 =   | / 50 =                               | X \$ 125 : |                   |  | 5 =                  |                   | -                                      | X \$ 25  | Ö =                    | -                           |   |  |
|                    | TOTAL CHARGEABLE CLAIMS   |  |           |                    | minus 20 = .  |                                      |            | X \$ 25 =         |  |                      |                   | OF                                     |  |                        |                             |   |  |
| INDEPENDENT CLAIMS |   |  |           | 3                  | minus 3 = .   |                                      |            |                   | X \$ 100                                       |                      |                   | OF                                     | X \$ 200   | ) =                    |                             |   |  |
| N                  | MULTIPLE DEPENDENT CLAIM PRES   |  |           |                    |   |                                      | +\$ 18     |                   | =  |                      | OR                | + \$ 360                               | =  |                        | $\dashv$                    |   |  |
| 1.                 | If the differen   | nce in column  | 1 is less | than z             | ero, enter "0" i  | n column 2                           |            | TOTA              |  |                      |                   | OR                                     | TOTAL  | 15                     | 300                         | 7 |  |
| AMENDMENT A        | Total<br>Independent  | (Column 1) CLAIMS REMAINING AFTER AMENOMEN   | Minus     | S                  | (Column 2<br>HIGHEST<br>NUMBER<br>PREVIOUSL<br>PAID FOR | PRESENT<br>EXTRA                     |            | X<br>-X.\$<br>+\$ | SMALI  RATE  \$ 25 =  100 =  180 =  LADOIT. EE | AC                   | DOI-<br>NAL<br>EE | OR<br>OR<br>OR<br>OR                   | SMALI  RATE  X \$ 50 =  X \$ 200 =  + \$ 360 =  OTAL ADDIT.  FEE | Ti                     | ITY<br>ADDI-<br>ONAL<br>FEE |   |  |
|                    |   | (Column 1)   |           |                    | (Column 2)  | (Column 3)                           |            |                   |  | -<br>-<br>-          |                   |  |  |                        |                             |   |  |
| N = 1              |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT  |           |                    | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR             | PRESENT<br>EXTRA                     |            | RA                | TE   | ADDI<br>TIONA<br>FEE | L                 |  | RATE   | ADDI-<br>TIONAL<br>FEE |                             |   |  |
| OME                | <b>Fotal</b>  | •  | Minus     |                    | 44  | = .                                  |            | X\$2              | 25 =   |                      | OF                | ₹ 7                                    | <b>(\$50 =</b>   |                        |                             |   |  |
| AMENOMENT          | ndependent  | •  | Minus     |                    | 444   | =                                    | [ ]        | X \$ 10           | 00 =   |                      | OF                | X                                      | \$ 200 =   |                        |                             |   |  |
|                    | FIRST PRESE   | ENTATION OF M  | ULTIPLE   | LE DEPENDENT CLAIM |   |                                      |            | <b>\$ 180 =</b>   |  |                      | OR +\$3           |  | \$ 360 =   | 360 =                  |                             |   |  |
|                    |   | PEE  |           |                    | OR TOTAL ADDIT.   |                                      |            |                   |  |                      |                   |  |  |                        |                             |   |  |
| - 44               | he "Highest Humb<br>ne "Highest Humb                                    | n 1 is less than the oper Previously Paid per Previously Paid or Previously Paid F | FOR IN TH | KS SPAC            | Ek less than 20°,<br>Ek less than T, e                  | enter "20".                          | he sp      | propria           | le box la c                                    | column f             | _                 |  |  |                        |                             |   |  |

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